POSITION INITIALS ID NO. DATE

FEE DETERMINATION

O.I.P.E. CLASSIFIER

FORMALITY REVIEW

RESPONSE FORMALITY REVIEW

## **INDEX OF CLAIMS**

V	***************************************	Rejected	N	Non-elected
	***************************************	Allowed		Interference
	(Through numeral)	Canceled A		Appeal
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If more than 150 claims or 10 actions staple additional sheet here